

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: OHIO

CASE MANAGEMENT SERVICES

A. Target Group: Medicaid eligible pregnant women who have been identified by a physician to be at risk of preterm birth or poor pregnancy outcome.

B. Areas of State in which services will be provided:

☒ Entire State.

☐ Only in the following geographic areas (authority of section 1915(g)(1) of the Act is invoked to provide services less than Statewide:

C. Comparability of Services

☐ Services are provided in accordance with section 1902(a)(10)(B) of the Act.

☒ Services are not comparable in amount, duration, and scope. Authority of section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of section 1902(a)(10)(B) of the Act.

D. Definition of Services: Case management to at-risk pregnant women is called "care coordination." It facilitates patient access to services and minimizes fragmentation of care and includes: scheduling recommended services and referrals, transportation, follow-up after a missed appointment, and a telephone number for 24-hour access to consultation and assistance in case of medical emergencies. In cases of women diagnosed to be at risk of preterm birth, care coordination may include frequent patient contact to determine the onset of preterm labor.

E. Qualification of Providers: Care coordinators will be employed directly or contracted with and under the supervision of a physician. Care coordinators must render services that are within their scope of practices as recognized under Ohio state law. Supplemental care coordination will be provided by County Departments of Human Services staff.

TN No. 88-4
Supersedes
TN No. new

Approval Date 3/25/87

Effective Date 4/1/87

HCFA ID: 1040P/0016P

Revision: HCFA-PM-87-4 (BERC)
MARCH 1987

SUPPLEMENT 1 TO ATTACHMENT 3.1-A
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OMB No.: 0939-0193

State/Territory: OHIO

F. The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.

1. Eligible recipients will have free choice of the providers of case management services.
2. Eligible recipients will have free choice of the providers of other medical care under the plan.

G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

TN No. 88-04
Supersedes
TN No. NEW

Approval Date 3/25/88

Effective Date 4/1/88

HCFA ID: 1040P/0016P

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: OHIO

CASE MANAGEMENT SERVICES
(PSYCHIATRIC ILLNESS)

- A. Target Group: THE TARGET GROUP IS THOSE PERSONS IN NEED OF GAINING COORDINATED ACCESS TO NECESSARY SERVICES IN THE COMMUNITY WHICH ARE INTENDED FOR THE MAXIMUM REDUCTION OF SYMPTOMS OF PSYCHIATRIC ILLNESS AND THE RESTORATION OF THE PERSON SERVED TO THE BEST POSSIBLE FUNCTIONAL LEVEL; AND WHICH ARE IDENTIFIED IN THE ISP OF THE PERSON SERVED.
- B. Areas of State in which services will be provided:
- ☒ Entire State.
- ☐ Only in the following geographic areas (authority of section 1915(g)(1) of the Act is invoked to provide services less than Statewide:
- C. Comparability of Services
- ☐ Services are provided in accordance with section 1902(a)(10)(B) of the Act.
- ☒ Services are not comparable in amount, duration, and scope. Authority of section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of section 1902(a)(10)(B) of the Act.
- D. Definition of Services: CASE MANAGEMENT CONSISTS OF FOUR COMPONENTS.
1. COORDINATION TO GAIN ACCESS TO AND THE COORDINATION OF NECESSARY EVALUATIONS AND ASSESSMENTS;
 2. COORDINATION OF SERVICES IDENTIFIED IN THE INDIVIDUAL'S SERVICE PLAN INCLUDING COMMUNITY SUPPORT PROGRAM SERVICES;

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State/Territory: OHIO

CASE MANAGEMENT SERVICES
(PSYCHIATRIC ILLNESS)

3. ASSISTANCE IN GAINING ACCESS TO ESSENTIAL COMMUNITY RESOURCES, INCLUDING HOUSING AND OTHER BASIC RESOURCES NECESSARY TO ENABLE AND MAINTAIN THE INDIVIDUAL'S INDEPENDENT LIVING IN THE COMMUNITY.
4. NECESSARY MONITORING AND FOLLOW-UP TO DETERMINE IF THE SERVICES ACCESSED HAVE ADEQUATELY MET THE RECIPIENT'S NEEDS AND TO DETERMINE NEEDED FOLLOW-UP ACTIVITY.

E. Qualification of Providers (Continued):

PROVIDERS OF CASE MANAGEMENT SERVICES MUST BE CERTIFIED BY THE OHIO DEPARTMENT OF MENTAL HEALTH TO PROVIDE MENTAL HEALTH SERVICES PURSUANT TO OHIO ADMINISTRATIVE CODE (OAC) SECTIONS 5122-23 TO 5122-29.

F. The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.

1. Eligible recipients will have free choice of the providers of case management services.
2. Eligible recipients will have free choice of the providers of other medical care under the plan.

G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

MARCH 1987

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: OHIOCASE MANAGEMENT SERVICES
(MENTALLY RETARDED AND/OR DEVELOPMENTALLY DISABLED PERSONS)

A. Target Group: The target group consists of two subsets:

1. Children who are being evaluated for or receiving services through a plan approved by the Ohio Department of Education (e.g., IFSP, IEP, ADA or 504 Plan);
2. Individuals who are determined to have mental retardation or other developmental disability according to Section 5126.01 of the Ohio Revised Code.

B. Areas of State in which services will be provided:

☒ Entire State.☐ Only in the following geographic areas (authority of section 1915(g)(1) of the Act is invoked to provide services less than Statewide:

C. Comparability of Services

☐ Services are provided in accordance with section 1902(a)(10)(B) of the Act.☒ Services are not comparable in amount, duration, and scope.

D. Definition of Services: Case management services are defined as those services necessary to assist an individual in accessing medical, social, educational and other needed services. Major components of the service include the coordination of the assessment; planning; crisis assistance; plan implementation; and monitoring.

E. Qualification of Providers: Case management will be provided by employees or contractors of a certified habilitation center. The provider will possess the necessary certification, credential, or approved qualifications set forth by the appropriate accrediting body.

TN No. 95-08

Supersedes

Approval Date MAY 24 1995Effective Date 1-1-95TN No. 94-27

HCFA ID: 1040P/0016P

Revision: HCFA-PM-87-4

(BERC)

SUPPLEMENT 1 TO
ATTACHMENT 3.1-A
FROM PRE-PRINT PAGE 8,
PAGE 2-C
OMB No.: 0939-0193

MARCH 1987

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State/Territory: OHIO

- F. The State assures that the provision of case management services will not restrict an individual's free choice of providers in violation of section 1902(a)(23) of the Act.
1. Eligible recipients will have free choice of the providers of case management services.
 2. Eligible recipients will have free choice of the providers of other medical care under the plan.
- G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose.

TN No. 94-27

Supersedes

TN No. 89-31

Approval Date 2/7/95

Effective Date 1-1-95

HCFA ID: 1040P/0016P